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REISSUE PATENT APPLICATION TRANSMITTAL

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Address to:	Attorney Doc		355774.00301			
Mail Stan Daineus	First Named		THARALSON, Douglas			
Mail Stop Reissue Commissioner for Patents	Original Pate	ent Number	6,578,211			
P.O. Box 1450		ent Issue Date	17 June 2003			
Alexandria, VA 22313-1450	(Month/Day/\ Express Mail					
APPLICATION FOR REISSUE OF	Express Wall	EL 947120495 US				
APPLICATION FOR REISSUE OF: (Check applicable box) Utility Patent Design Patent Plant Patent						
APPLICATION ELEMENTS (37 CFR 1.173)	ACCOMPANYING APPLICATION PARTS					
Fee Transmittal Form (PTO/SB/56) (Submit an original, and a duplicate for fee processing	Statement of status and support for all the changes to the claims. See 37 CFR 1.173(c).					
2. Applicant claims small entity status. See 37 CFR 1.27.	11. Original Patent Grant					
3. Specification and Claims in double column copy of pat (amended, if appropriate)	Specification and Claims in double column copy of patent format (amended, if appropriate)					
4. Drawing(s) (proposed amendments, if appropriate)						
5. Reissue Oath/Declaration (original or copy) (37 CFR 1.175) (PTO/SB/51 or 52)	Reissue Oath/Declaration (original or copy) (37 CFR 1.175) (PTO/SB/51 or 52)					
6. Power of Attorney (incorporated in Declaration)	, ,					
7. Original U.S. Patent currently assigned? Yes (If Yes, check applicable box(es))	Original U.S. Patent currently assigned? Yes No (If Yes, check applicable box(es))					
Written Consent of all Assignees (PTO/SB/53)	14. (if applicable) 15. Preliminary Amendment					
37 CFR 3.73(b) Statement (PTO/SB/96)						
8. CD-ROM or CD-R in duplicate, Computer Program (Appendix) or large table (PTO/SB/96) 16. (Should be specifically itemized) 17. Other: • EXPRESS MAIL CERTIFIC						
9. Nucleotide and/or Amino Acid Sequence Submission (if applicable, all of the following are necessary)	· CHECK for PETITION FEE: AMOUNT- \$1300°°					
a. Computer Readable Form (CFR)		111300				
b. Specification Sequence Listing on: i						
ii paper						
c. Statements verifying identity of above copies						
18. CORRESPONDENCE ADDRESS						
Customer Number: 28983 OR Correspondence address below						
Name						
Address						
City State Zip Code						
Country Telephone Fax						
Nome (plum)						
Name (Print/Type) Stefan J. Kirchanski Registration No. 36,568						
Signature Styn J. Kuch ' Date 10 March 2003						

This collection of information is required by 37 CFR 1.173. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Reissue, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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REISSUE APPLICATION FEE TRANSMITTAL FORM						Docket Number (Optional) 355774.00301							
Claims as Filed – Part 1													
	(1)		(2)		(3)			Small	Entity			Other than a S	mall Entity
	Clain in Pate		nber Filed in Reissue pplication	Number Extra		а	Rate		Fee			Rate	Fee
Total Claims (37 CFR 1.16(j)) Independent claim	(A) 5	. 1	53	**** 33		=	x \$ _ 9 _=		297			x \$=	
(37 CFR 1.16(i))		(D)	1	• 0		=	×\$	=			or	x \$=	
					Basic Fee (37 CFR 1.16(h))		\$ <u>385.00</u>				\$	
	="				Total Filing	Filing Fee			\$ <u>682</u>	.00		OR	\$
	r 			Cla	ims as Amer	nded		!					
		l) emaining		(2) Highest Number		Ι,	(3) Extra	Small Ent				Other than a	Small Entity
		endment		Pr	eviously aid For	C	laims esent	Rate		Fee		Rate	Fee
Total Claims (37 CFR 1.16(j))	***		MINUS	**		* :	=	x \$ _	=			x\$:	=
Independent Claims (37 CFR 1.16(i))	***		MINUS	****		= x		x \$ _	=			x\$:	=
						Total Additional Fe		ee	\$		OR	\$	
* If the entry in (D) is less than the entry in (C), Write "0" in column 3. ** If the "Highest Number of Total Claims Previously Paid For" is less than 20, Write "20" in this space. *** After any cancellation of claims. *** If "A" is greater than 20, use (B – A); if "A" is 20 or less, use (B – 20). **** "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C). *** Applicant claims small entity status. See 37 CFR 1.27. *** Please charge Deposit Account Number 18-0586 in the amount of _\$682.00 A duplicate copy of this sheet is enclosed. *** After any cancellation of Claims Previously Paid For" or Number of Independent Claims in Patent (C). *** After any cancellation of Claims Previously Paid For" or Number of Independent Claims in Patent (C). *** If the "Highest Number of Laims Previously Paid For" or Number of Independent Claims in Patent (C). *** If the "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C). *** Applicant claims small entity status. See 37 CFR 1.27. *** If the "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C). *** Applicant claims small entity status. See 37 CFR 1.27. *** If the "Highest Number of Independent Claims Previously Paid For" or Number of Independent Claims in Patent (C). *** Applicant claims small entity status. See 37 CFR 1.27. ** Please charge Deposit Account Number 18-0586 in the amount of see: ** A duplicate copy of this sheet is enclosed. ** A check in the amount of \$ to cover the filing/additional fee is enclosed.													
Payment by credit card. Form PTO-2038 is attached. WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit cad information and authorization on PTO-2038.													
	Date						•	Signa	ture 🗸	Applicar	nt, Atto	orney or Agent	of Record
Registration !	36,568	onlicable					_					chanski	
Registration Number, if applicable Typed or printed name													

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

Attorney Docket No: 355774.00301

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:	Art Unit: 1631
Tharalson, et al.	Examiner: Allen, Marianne P.
Serial No: 09/838,041	
Patent No: 6,578,211	
Filed: April 20, 2001	
For: COMBINATION CO-SLEEPER AND CH TABLE	ANGING
CERTIFICATE OF MAILING "Express Mail" Mailing Lab Date of Deposit: N	el No. <u>EL 947120495 US</u>
Mail Stop REISSUE Commissioner for Patents P.O. Box 1450 Alexandria VA 22313-1450	
Dear Sir:	
 sheet(s) of □ formal □ informal drawin Reissue Application Declaration by the ○ Consent of Assignee; Statement of Nor □ certified copy of patent application is claimed in the subject case pursuant ○ Preliminary Amendment □ Assertion of Small Entity Status under □ Request And Certification Under 35 U. □ Information Disclosure Statement, return postcard 	TITION filing fee fication; claim(s); page(s) of abstract gs e Assignee n-Assignment No which was filed from which priority to 35 U.S.C. § 119 37 CFR 1.27 S.C. 122(b)(2)(B)(i) for non-publication eferences listed enclosed.
are being deposited with the United States Postal Seservice with sufficient postage under 37 C.F.R. addressed to: Mail Stop REISS	§ 1.10 on the date indicated above and are
Commissioner fo Washington, D.C	r Patents
Date: March 10, 2004	Heather B. Del Bosco Name of person mailing papers
REED SMITH LLP 1901 Avenue of the Stars, Suite 700 Los Angeles, CA 90067 Phone: (310) 734-5200 Fax: (310) 734-5299	Signature